

Prescription Drug Coverage

Covered prescription medications are available at participating pharmacies.

Your copayments for up to a 30-day supply are:

► Tier 1:	.....	\$10
► Tier 2:	.....	\$25
► Tier 3:	.....	\$50

These copayment amounts will be shown on your Plan identification (ID) card. Bring your prescription or refill to a participating pharmacy, along with your ID card, and pay the applicable copayment.

Harvard Pilgrim's mail service prescription drug program (Maintenance medications ONLY)

If you have a condition (e.g., high blood pressure) that requires maintenance medications, you can order up to a 90-day supply of these drugs through Harvard Pilgrim's mail service prescription drug program. When you order a 90-day supply, you'll save money on your copayments as well as trips to the pharmacy.

Your copayments for a 90-day supply are:

► Tier 1:	.....	\$20
► Tier 2:	.....	\$50
► Tier 3:	.....	\$110



This information refers to products and services offered by Harvard Pilgrim Health Care and its affiliates, Harvard Pilgrim Health Care of New England and HPHC Insurance Company.